## L21000244057

(Rec	questor's Name)	
(Add	Iress)	
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(City	/State/Zip/Phone	<del>=</del> #)
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
Considerations to 5	700 O#0	
Special Instructions to F	·iling Officer:	

Office Use Only



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## **COVER LETTER**

TO: Registration Section

Division of Cor	porations		
	L ROOF ELC		
SUBJECT:	Name of Lin	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	RODRIGO CRUZ		
		Name of Person	
	RC METAL ROOF LLC		
	<del></del>	Firm/Company	
	8301 N 12TH ST		
		Address	<del></del>
	TAMPA, FL 33604		
		City/State and Zip Code	
	metal.roff.20@gmail.com		
For further information c	n-mail address: ( oncerning this matter, please c	to be used for future annual report not all:	ification)
	wheeling in maker, prease e		
RODRIGO CRUZ		813 2963559 at ()	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
☐ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	petian
Registration Section Division of Corporations		Registration Section Division of Corporations	
P.O. Box 632	-	The Centre of	•
Tallahassee, I	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	, Fl	lorida
	Enter Florida street addre.	A.S
New Registered Office Address:		
Name of New Registered Agent:		22.5
		W 12:51
agent and/or the new registered office address here:		A
B. If amending the registered agent and/or registers	red office address on our records, enter	the name of the new register
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>	·
Enter new mailing address, if applicable:		
		· · · · ·
(Principal office address MUST BE A STREET ADD	ORESS)	·
Enter new principal offices address, if applicable:		
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC	"" or the abbreviation "L.L.C."
A. If amending name, enter the new name of the lin	mited liability company here:	
This amendment is submitted to amend the following:		
Florida document number 1.21000244057	·	
The Articles of Organization for this Limited Liability	Company were filed on JUNE 25, 2021	and assigned
(A Flori	ility Company as it now appears on our record da Limited Liability Company)	<u>us.</u> )
(Name of the Limited Links	ility Company as it now appears on our recorr	ds )

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	RODRIGO CRUZ	8301 N 12TH ST	■Add
		TAMPA, FL 33604	
			□Change
			□Add
			□Remove
		<del></del>	Change
			□Remove
			Change
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is til	
ited [	07-14-2021
	97-14-2021  Rodrigo City  Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member